BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

450117 - 03695

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE (OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			4214				ſ	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		ľ	BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			#2 minus 20=		*		Ī	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			L , 	nus 3 =	*			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2		TOTAL		OR	TOTAL	740	
CLAIMS AS AMENDED - PART II											OTHER		
(Column 1)			(Colum			(Column 3)	Column 3) SMALL		ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	* ENTATION OF M	Minus	***	T CL AIM	=		X42=		OR	X84=		
	TINOS PALOL	INTATION OF MI	OLTIPLE DEF	CINDEIN	CLAIIVI			+140=		OR	+280=		
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colu	mn 2)	(Column 3)	•	RDDH. FEE			ADDIT. FEET		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	* NTATION OF MU	Minus	***		=		X42=		OR	X84=		
	FINST PRESE	CLAIM	. 🔲	۱ <u> </u>	+140=		OR	+280=					
	·							TOTAL ADDIT. FEE	==	OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colur		(Column 3)				•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
AMENDMENT C	:	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=-		X42=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140=										+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	TOTAL			
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE											ADDIT. FEE		
		ber Previously Pai					r foui	nd in the app	ropriate box	in co	lumn 1.		